

African Leadership for Child Survival- A Promise Renewed

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It is an honor for me to be here alongside African colleagues in health and development to represent the United States Government at the **African Leadership for Child Survival- A Promise Renewed**. I would like to congratulate Minister Tedros, Minister Kesete, and the Ethiopian Government for hosting this meeting.

I commend the progress they have made in tackling child survival and strengthening Ethiopia's health sector—and their willingness to share best practices to further Africa's reductions in child mortality.

Since the development of Ethiopia's first national health policy in the mid-1990s, Ethiopia and the United States Government have been partners to increase and expand access of quality health services to Ethiopians nationwide.

The United States is proud to have a long-standing health program in Ethiopia with many of our agencies working in the health sector: CDC, DOD, Peace Corps and USAID. And it is a great for us to see Ethiopia taking a leadership role across the continent.

By helping children reach their fifth birthdays, their futures become far brighter and we can focus on the broader needs of children to grow into adulthood and become productive members of society.

Improving child survival brings a demographic dividend through fertility declines, reduced mortality, and increased economic productivity.

As you heard this morning, the past few decades brought remarkable gains in child survival. However more than 3.5 million children under five still die every year in Africa, and more than 50 percent of these deaths are largely from preventable causes like pneumonia, diarrhea and malaria. We know that we can end preventable child deaths, but to achieve that goal we have to accelerate our efforts.

That's why the U.S. Government joined UNICEF and the governments of India and Ethiopia in June to host a Child Survival Call to Action in Washington. As you saw from the video, more than 700 global leaders came together to set a goal of reducing child mortality to 20 deaths per 1,000 births in every country in the world by 2035. Assuming countries already making progress continue at their current trends, achieving this rate will save an additional 5.6 million children's lives every year.

However, to reach our goal, we agreed to accelerate our efforts through five strategic shifts:

- Intensify our focus and support for the countries with the highest rates of child death—
 since 80 percent of child deaths occur in 25 countries.
- 2. Identify particularly vulnerable communities in urban slums and rural settings.
- 3. Prioritize high-impact solutions—like injectable antibiotics to prevent newborn sepsis, oxytocin and misoprostol to prevent post-partum hemorrhaging, and oral rehydration solution and zinc to prevent diarrhea, one of the largest killers of children.
- 4. Invest in mothers' education, literacy, and safe childbirth.
- 5. And finally, measure our progress much more closely through tools like scorecards and using data for decision-making.

In addition to these strategic shifts, three objectives emerged from the *Call to Action*:

- 1. To mobilize political leadership to end preventable child deaths.
- To drive sustained collective action and mutual accountability for result.
- 3. To establish the importance of transparency and evidence-based planning and reporting to accelerate progress and deliver results.

By implementing these objectives, *A Promise Renewed* led by UNICEF maintains the momentum of the Call to Action. A sustained effort is exactly what is needed to reach our goal – and the U.S. Government is pleased to support UNICEF in this endeavor.

America's legacy in child survival is a proud one. Alongside many of the partners in this room, USAID has played a vital role for decades in the development and delivery of low cost, high impact health interventions to reach the most vulnerable children.

Such innovations include safe injection technologies like auto-disable syringes and vaccine vial monitors, a diagnostic test for anemia and for vitamin A deficiency, safe birth kits and other products that are now used in countries throughout the developing world. USAID is also the leader in supporting family planning worldwide, ensuring women wanting contraceptives have access, particularly long-acting and permanent methods. We know that the health timing and spacing of pregnancies impacts both maternal and child survival.

All of these investments have been paying dividends, among them:

- In 24 countries where we've been heavily involved, maternal mortality declined by 40 to
 65 percent.
- Eleven of the President's Malaria Initiative focus countries have had reductions in childhood mortality rates, which ranged from 16 to 50 percent.
- o In one year, USAID-supported programs provided 29 million infants and children with vitamin A supplementation in six countries.

To further accelerate progress against maternal and child deaths, we need to sustain these efforts in addition to harnessing the creativity and ingenuity of a range of problem solvers throughout the world. The Saving Lives at Birth Challenge – a partnership between USAID, the Bill & Melinda Gates Foundation, the Government of Norway, Grand Challenges Canada and DFID – is doing just that. The Challenge seeks to leverage energy and innovation to protect mothers and newborns in the poorest places during their most vulnerable hours. The program has already identified 39 of the world's most creative ideas to tackle this challenge, and this week Saving Lives at Birth announced its third global call for transformational solutions.

Finally, through the U.S. Government's Global Health Initiative, we are encouraging country ownership, building sustainability through health systems strengthening, leveraging global health partnerships and private sector engagement. These are all crosscutting elements that contribute to progress in reducing child mortality.

The Call to Action proved that we can come together across communities, see our common purpose and commit ourselves to a goal. USAID Administrator Raj Shah's vision helped make the Call to Action a reality, and his continued dedication keeps child survival at the forefront of global development. I am now pleased to introduce a video message from Dr. Shah.

Thank you